

Rental and Special Event Application and Checklist Parks and Recreation Department

Thank you for choosing Fluvanna County for your upcoming event. We are ready to assist! Completion of this application is the first step in process to secure the necessary approvals for your event.

APPLICANT INFORMATION Please notify the Parks Department if any information below changes.									
Applicant Name (Last, Fir		·				or Older?	С	County Re	
Application Type:	Individual 🔲 N	Ion-Profit Org.		For Profit Org	g.	Liability In:	surance?)*	Yes No
Business / Organization /	Group Name			Event On-Site	e Manag	er Name a	and Phon	ie Numbi	er
Mailing address				City			State		Zip
Phone Cell Email						Event Typ	e/Time	·	
General Requirements	S								
 Submit your application to Fluvanna County Parks and Recreation at least ninety (90) days before your event (may be submitted up to twelve (12) months in advance). Deposit required with application to secure date(s). Fee Payments required two (2) weeks prior to the event. Supporting documents can be submitted with your application or at least 30 days prior to the event. Incomplete, illegible, and/or unsigned applications will not be processed. For questions or assistance, please contact Parks and Recreation at (434) 589-2016. 									
		Complete Ren for any of tl		Application (I					
Community Center FCanoe or Kayak	Rooms	CarysbroAthletic		Gym ds (hourly)			Tents, Ta Picnic Sh		d Chairs der 50 people)
		.1.1.6			10	2.6\			
		plete Special E							
 Community Event Alcohol Tents Picnic Shelter (50+ people) Walk/Run Event Amplified sound Sales of food, goods, or merchandise Wedding Wedding 									
Special Event Fees (Admission/Non-Admission Events) * 50% discount for 501(c) Organizations									
	Pole Barn Area	Pole Barn Area w/ ABC		ouse Grounds Area	House (Entire Event		Entire Park Event Area w/ABC
Events	\$350	\$400		\$350	\$4	100	\$70	00	\$750
Weddings	\$250	\$300		\$250	\$3	300	\$50	00	\$550

Rental Application

Photo ID required

\$200 Deposit required per venue or equipment rental when Application is submitted

		Fe	ees		
Facility Requested	Unit	Resident	Non- Resident	Date(s)	Total Fee
Carysbrook Gymnasium	Hour	\$80.00	\$92.00		
Carysbrook Sports Complex Baseball Field	Hour	\$25.00	\$28.75		
Carysbrook Sports Complex Softball Field	Hour	\$25.00	\$28.75		
Comm. Center Multi-Purpose Rm (125 people)	Hour	\$90.00	\$103.50		
Comm. Center Multi-Purpose Rm (125 people)	Hour w/ABC	\$100.00	\$115.00		
Comm. Center Meeting Room (30 people)	Hour	\$30.00	\$34.50		
Pleasant Grove Park Pole Barn	8am-1pm	\$80.00	\$92.00		
Pleasant Grove Park Pole Barn	3pm-Dusk	\$80.00	\$92.00		
Pleasant Grove Park Pole Barn	Day	\$150.00	\$172.50		
Pleasant Grove Park Baseball/Softball Field	Hour	\$15.00	\$17.25		
Pleasant Grove Park Soccer Field (3 avail)	Hour	\$15.00	\$17.25		
Eastern Trailhead Large Pavilion (40 people)	Day	\$50.00	\$57.50		
Eastern Trailhead Small Pavilion (25 people)	Day	\$25.00	\$28.75		
Equipment Requested					
Chairs (150 avail)	Day	\$4.00	\$4.60		
Tables - 6' Rectangular (70 avail)	Day	\$6.00	\$6.90		
Tables - 8' Round (12 avail)	Day	\$8.00	\$9.20		
14' x 20' Tent Canopy (2 avail)	Day	\$100.00	\$115.00		
18' x 30' Tent Canopy (4 avail)	Day	\$150.00	\$172.50		
Canoes (8 avail; includes life vest and paddle)	Weekday	\$25.00	\$28.75		
Canoes (8 avail; includes life vest and paddle)	Weekend	\$60.00	\$69.00		
Kayaks (8 avail; includes life vest and paddle)	Weekday	\$25.00	\$28.75		
Kayaks (8 avail; includes life vest and paddle)	Weekend	\$60.00	\$69.00		

HOLD HARMLESS CLAUSE

- The responsible party / renter agrees to hold harmless the Department of Parks and Recreation, Fluvanna County, and its officials and employees from and against any and all claims, suits, actions, damages and/or causes of action during the term of this agreement, for any personal injury, loss of life, property and/or damage to property sustained in or about the said premises, and from and against all costs, expenses and liability incurred in and about any such claims the investigation thereof or the defense of any action process brought thereon, and from and against any orders and/or judgments that may be entered therein including court costs and attorneys' fees, arising out of or resulting, directly or indirectly, from the Service Provider's (or Service Provider's subcontractor's) performance or breach of the contract.
- The responsible party / renter also agrees that by signing below they will pay for any damages incurred while using the facility and certifies that the rules for use have been read and understood.

Applicant Signature	Applicant Title	Date	

Special Event Application

- * Applicants must submit a copy of their **Certificate of General Liability Insurance** in the amount of \$1,000,000 naming Fluvanna County as "additional insured" and the certificate holder for the date(s) of your event to include set up and tear down dates.
- * Applicants must also have Fluvanna County listed on the applicants General Liability policy of insurance, including coverage for property damage while park property is occupied by the permittee.
- * Supporting documents below can be submitted with your application or at least 30 days prior to the event:
 - Certificate of insurance (Listing Fluvanna County as "Additional Insured")
 - Any additional permits and licenses required (e.g., ABC License, Health permit, etc.)

 Photo ID required \$200 Deposit required per venue or equipment rental when Application is submitted 						
	Sec	tion A – EVENT INFORM	ATION			
Event Name	Event De	escription	Open t	to General Public?		
Anticipated Participants:	□ 51–250 □	151- 500	0 2,501 – 5,000	<u> </u>		
Event Type <i>(check all tha</i> Parade/Run/Walk Community Event	:/Bike Event		· =	Tournament Family Reunion		
Event Location Requested (check all that apply) Pleasant Grove Park:						
Event Date	Set-Up Time	Start Time	End Time	Breakdown Time		
☐ Vendors (non-food☐ Vendors (food)	Event Activities (check all that Apply) Vendors (non-food) Alcohol Bleachers Petting Zoo Staging Tent(s) Banners/Signs PA System Mechanical Rides/ Inflatables Live Music Satellite Parking Generator(s) Other:					
		Section B – MEDICAL				
Please include the event's medical communication plan, contact number, first aid station location, and types of resources that will be at the event, description of how resources will be managed and deployed, as well as hours of set-up and dismantle of medical aid stations, as applicable.						

Sec	tion C – FOC	OD, MERCHAN	IDISE, A	ND AL	COHOL VEND	OR INFORM	MATION		
cooking food on site to b	A vendor is anyone who is serving, selling or sampling food, beverages or merchandise. Please note, any individual or organization cooking food on site to be sold to the general public on County property MUST obtain a permit through the Fluvanna County Health Department at (434) 972-6259 and present a copy of endorsement with this application along with your Coordinators Check List.								
Food Service <i>(check all that</i> Served Prepared in a Kitch		Sold Prepare	ed Outdo	ors		Catered Delivered	from another I	ocation	
Merchandise/Crafts (specify the number and types of vendors expected)									
Alcohol Service <i>(check all that apply)</i> Served Sold Wine Copy of ABC Permit must be filed with Parks & Recreation office Draft Beer Bottled/Canned Beer Liquor									
Vendor providing the alcohology Yes No	ol? Alcoh	nol Vendor Nam	e(s) and	Phone N	lumber(s)				
		Se	ction D	– SECL	IRITY				
 As an event organizer, you are responsible for the actions and conduct of any and all persons and organizations (participants, spectators, sponsoring organization, its officers, employees, agents or person under their control as permitted by law) associated with the permitted event. The event organizer is also responsible for and will accept all costs related to policing, cleaning, and restoring the venue after the event or activity, and will reimburse Fluvanna County for any such costs incurred. Please provide a detailed security plan for your event if: (1) alcohol is being served, (2) materials or equipment are left overnight and/or, (3) live entertainment is provided. This document should indicate the number of security personnel per shift throughout each day of the event. The County reserves the right to require security at any special event if deemed necessary. 							d by law) ted to policing, a costs incurred. nt are left personnel per		
Private Security being used? YES NO	S	Security Compar	ny Name						
Mailing Address				City	City		State	Zip	
Phone	Cell		Fax			Email			
Day of Event Contact Phone Cell									
Section E – RESTROOMS AND WASTE DISPOSAL Portable Restroom pick-up date and time must be within 2 days of event conclusion.									
# Trash Receptacles?		# Portable R	# Portable Restrooms?			# Handica	# Handicapped Portable Restrooms?		
Portable Restroom Provider Name		Phone Num	Phone Number		Delivery Date		Pick-Up D	Pick-Up Date	

Any structur	e, tent, bleache		CTURES, TENTS, BLEACHERS, AND S inspected prior to the event may require				
Tents (Code	es: C - Cookir	ng underneath; S - So	ales of food, merchandise, etc.; D – Inf	o, registration, non-sales displays)			
Code	No. of Tents:	Sizes (Sq Ft)					
Bleachers, Sta	ge(s), or Scaffol	ding					
Si	ze	Supplier					
Mechanical Ri	des or Inflatabl	es					
			 PARKING AND TRANSPORTATION ing permits and signage may be required 				
How will people get to/from your event? Personal Vehicles Shuttle/ Satellite Parking Other; Explain: Shuttle/ Satellite Parking Statellite Parking Satellite Parking Church Grounds Satellite Parking Location:				School Grounds			
Special Parkin	g Needs <i>(for R\</i>	/'s, trailer, support veh	nicles)				
Vehicle Descri	ption	Location (Provide on	-site map)	Purpose			
Will your ever	t require additi	onal traffic/parking co	entrol at the entrance or anywhere on th	e grounds? YES NO			
	All		tion H – MAP AND LOGISTICS re subject to the approval of Parks & Rec	reation Dept.			
Site Map (required for all applicants) Attach a site map clearly indicating the layout of the event. The site map should indicate the relative location of the following: (1) all sources of amplified sound, (2) tents and canopies with sizes; (3) stages, (4) promotional vehicles, (5) inflatables, (6) portable toilets, (6) dumpsters, (7) fencing, barricades, and other structures, (8) proposed driving paths for all equipment and supply vehicles, (9) location of vehicles you wish to retain on county property pre, during, and post event date, (10) locations of alcohol, food and merchandise service/sale, (11) Start/Finish of a walk, run, race event, (12) medical facilities or shelters, and (13) proposed trail or street closures.							
All events route map	Route Map (for runs, walks, bike rides, horse trail rides) All events that will be a run, walk, or other activity in which participants will be following a course will be required to attach a route map and a written document of the proposed route of the event. For a more detailed route map, please use a free website such as, mapmyrun.com, Bing maps or Google maps.						
	Attach a	ny event-specifi	c, additional information to	the application.			

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Section I – OTHER PERMITS Other County, State, and private agencies may require a permit relative to your event. Please indicate below using the following codes if you have applied or will be applying for a permit from each listed agency. **HA** – Have Applied WA - Will Apply **N/A** - Does Not Apply to this Event **RP** - Received Permit Code Dept / Agency Issue Planning/Zoning Dept: Noise ordinance Health Dept: Food concessions/ food sampling Fire Dept: Fireworks, pyrotechnics, emergency plan Virginia ABC Dept: Alcoholic beverages Equipment inspections: tents (900+ sqft), bleachers, amusement rides, generators (30+ amps) Building Insp. Dept: Sheriff's Dept: Request for street, road, and/or parking lot closures **HOLD HARMLESS CLAUSE**

•	The responsible party / renter agrees to hold harmless the Department of Parks and Recreation, Fluvanna County, and its
	officials and employees from and against any and all claims, suits, actions, damages and/or causes of action during the term of
	this agreement, for any personal injury, loss of life, property and/or damage to property sustained in or about the said
	premises, and from and against all costs, expenses and liability incurred in and about any such claims the investigation thereof
	or the defense of any action process brought thereon, and from and against any orders and/or judgments that may be entered
	therein including court costs and attorneys' fees, arising out of or resulting, directly or indirectly, from the Service Provider's
	(or Service Provider's subcontractor's) performance or breach of the contract.

•	The responsible party /	/ renter also agree	s that by signin	g below they	will pay fo	or any d	amages ir	ncurred w	hile usi	ng the f	acility
	and certifies that the ru	ules for use have b	een read and ເ	inderstood.							

Applicant Signature	Applicant Title	Date

Office Use Only - Checklist							
Category	Yes	No	N/A				
Deposit Received				Amount \$	Check #		
Fee Received				Amount \$	Check #		
Deposit Returned				Amount \$	Date:		
Complete Rental/Special Event Application Received							
Photo ID Checked							
ABC License				Date:			
IRS 501(c) Status Documents							
Site Map / Route Map							
Parking & Shuttle / Traffic Control / Barricade Plan							
Insurance Certificate of Liability							
Security Required							
Communications Plan							
Park Admin Approval							